

PART B—ISSUE FEE TRANSMITTAL

Complete and mail this form, together with application, to:

Box ISSUE FEE
Assistant Commissioner for Patents
Washington, D.C. 20231

1-31-00

B #

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

LM41/1108

N RHYS MERRETT

SHARP COMFORT AND MERRETT, P.C.
13355 10455 NOEL ROAD SUITE 4710 1340
DALLAS TX 75240-6626

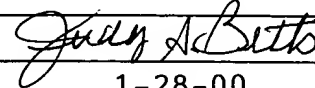
Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

JUDY A. BETTS

(Depositor's name)



(Signature)

1-28-00

(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/619,682	05/23/96	063	LEGREE, T	2744 11/08/99
First Named Applicant	CALLAGHAN, 35 USC 154(b) term ext. = 0 Days.			

TITLE OF INVENTION DATA ENTRY SYSTEMS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2	5003/PCT/US	455-422.000	D95 UTILITY	NO	8605.00 \$1210.00	02/08/00

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Sharp, Comfort & Merrett, P.C.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE Dataquill Limited

(B) RESIDENCE: (CITY & STATE OR COUNTRY) Tortola, British Virgin Islands

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

☒ Issue Fee☒ Advance Order - # of Copies 5

4b. The following fees or deficiency in these fees should be charged to:

DEPOSIT ACCOUNT NUMBER 500315

(ENCLOSE AN EXTRA COPY OF THIS FORM)

☒ Issue Fee

5

☒ Advance Order - # of Copies

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

27,250

(Date)

1-28-00

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

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02/01/2000 AMDHAM1 00000136 08619602

01 FC:242

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**FEE TRANSMITTAL
for FY 1999**Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity
statement, otherwise large entity fees must be paid. See Forms
PTO/SB/09-12.TOTAL AMOUNT OF PAYMENT (\$) **620.00****Complete if Known**

Application Number	08/619,682
Filing Date	April 2, 1996
First Named Inventor	Callaghan et al.
Group Art Unit	2744
Examiner Name	Legree, T.
Attorney Docket Number	5003A/PCT/US

METHOD OF PAYMENT (check one)The Commissioner is hereby authorized to charge indicated
fees and credit any over payments to:Deposit Acct. # **50-0315**Deposit Acct. Name: **Sharp, Comfort & Merrett, P.C.**
☒ Charge Any Additional Fee
Required Under 37 CFR 1.16
and 1.17

☐ Charge the Issue Fee Set in
37 CFR 1.18 at the mailing of the
Notice of Allowance
2. Payment Enclosed:
☒ Check ☐ Money Order ☐ Other
FEE CALCULATION**1. FILING FEE**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	760	201	380	Utility filing fee	
106	310	206	155	Design filing fee	
107	480	207	240	Plant filing fee	
108	760	208	380	Reissue filing fee	
114	214	214	75	Provisional fee	

SUBTOTAL (1) \$**2. CLAIMS**

Total Claims	Extra	Fee from below	Fee Paid
<input type="text"/> -20 =	<input type="text"/> X	<input type="text"/> X	<input type="text"/>
Independent Claims <input type="text"/> -3 =	<input type="text"/> X	<input type="text"/> X	<input type="text"/>
Multiple Dependent Claims <input type="text"/>	<input type="text"/> X	<input type="text"/> X	<input type="text"/>

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	260	204	130	Multiple Dependent claims
109	78	209	39	Reissue independent claims over original patent
110	18	210	9	Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)**FEE CALCULATION (continued)**

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Description
105	130	205	65	Surcharge-late filing fee or oath
127	50	227	25	Surcharge-late provisional filing fee or over sheet.
139	130	139	130	Non-English specification
147	2520	147	2520	For filing a request for reexamination
112	920	112	920	Requesting publication of SIR prior to Examiner action
113	1840	113	1840	Requesting publication of SIR after Examiner action
115	110	215	55	Extension for reply within first month
116	380	216	190	Extension for reply within second month
117	870	217	435	Extension for reply within third month
118	1360	218	680	Extension for reply within fourth month
128	1850	228	925	Extension for reply within fifth month
119	300	219	150	Notice of Appeal
120	300	220	150	Filing a brief in support of an appeal
121	260	221	130	Request for oral hearing
138	1510	138	1510	Petition to institute a public use proceeding
140	110	240	55	Petition to revive-unavoidable
141	1210	241	605	Petition to revive-unintentional
142	1210	242	605	Utility issue fee (or reissue)
143	430	243	215	Design issue fee
144	580	244	290	Plant issue fee
122	130	122	130	Petitions to the Commissioner
123	50	123	50	Petitions related to provisional applications
126	240	126	240	Submission of Information Disclosure Statement
581	40	581	40	Recording each patent assignment per property (x # of properties)
146	760	246	380	Filing a submission after final rejection (37 CFR 1.129(a))
149	760	249	380	For each additional invention to be examined (37 CFR 1.129(b))

605Other fee (specify) **5 soft copies****15*****Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)** **\$620****SUBMITTED BY***N. Rhys Merrett*

complete (if applicable)

Typed or
Printed Name**N. Rhys Merrett**

Reg. Number

27,250

Signature

Date

1-28-00Deposit Account
User ID**50-0315**

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Office, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.